## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Note: A certificate of mailing can only be used for domestic mailings of the

|  |   | SCINTO   | SEP 20  | 1  | of mailing can only be used of this certificate cannot be used and paper, such as an assignmate of mailing or transmission.  ertificate of Mailing or Transmittal is being with sufficient postage for final Stop ISSUE FEE address SPTO (571) 273-2885, on the or this property of the sufficient postage.   |  |
|--|---|--|---|--|---|--|
| 30/2005 MBEYENE2 00000   | 082 09873999  | /9   | <sup>የ</sup> እ  | LOV Lansinited to the Oc   | 11 10 (371) 273-2003, on the C  | (Depositor's name)   |
| FC:1501<br>FC:1504   | 1400.00 GP<br>300.00 GP   |  | PADEMARK  | Orr  |   | (Signature)  |
| C:8001   | 15.00 OP  | r  |   |  | · · · · · · · · · · · · · · · · · · ·   |  |
| APPLICATION NO.  | FILING DATE   |  | FIRST NAME  |  | ATTORNEY DOCKET NO.   | CONFIRMATION NO.   |
| 09/873,999 TITLE OF INVENTION: M   | 06/06/2001<br>IETHOD OF MANUFACTU   | JRING OPTICAL  | •   | i Suzuki   | 35.C15413   | 7495   |
| APPLN. TYPE  | SMALL ENTITY  | ISSUE F  | EE  | PUBLICATION FEE  | TOTAL FEE(S) DUE  | DATE DUE   |
| nonprovisional   | NO  | \$1400   |   | \$300  | \$1700  | 11/29/2005   |
| •  | EXAMINER  |  | JIT   | CLASS-SUBCLASS   | 7   |  |
|  | CULBERT, ROBERTS P  |  | ART UNIT CLASS-SUBCLA  1763 216-024000  |  | _   |  |
| "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNICATION Kabus  Please check the appropriate  4a. The following fee(s) are Issue Fee  Publication Fee (No signal of the Publi | EE Shiki Kaisha assignee category or categor enclosed: mall entity discount permitte    | e of a Customer  E PRINTED ON Telow, no assignee of this form is NO (E   | or agents (2) the nai registered 2 registered 2 registered listed, no :  THE PATENT data will app T a substitute 3) RESIDENC Tokyo inted on the p  D. Payment of A check  Payment | pear on the patent. If an assign for filing an assignment.  CE: (CITY and STATE OR CO), Japan  patent): Individual (See(s)):  in the amount of the fee(s) is early credit card. Form PTO-203 | that position is a member a mes of up to if no name is a member a mes of up to if no name is a mes of up to if no name is a mes of up to if no name is a member a | oup entity Governmen   |
| Advance Order - # of  5. Change in Entity Status   | Copies 5 (from status indicated above   |  | The Director Deposit Acc  | ector is hereby authorized by ount Number <u>06-1205</u>   | charge the required fee(s), or (enclose an extra c  | credit any overpayment, to opy of this form).  |
| a. Applicant claims St   | MALL ENTITY status. See 3 is requested to apply the Issu ublication Fee (if required) w | 37 CFR 1.27.  The Fee and Publicate in the properties of the prope | tion Fee (if and  | y) or to re-apply any previous   | ALL ENTITY status. See 37 C<br>sly paid issue fee to the applica<br>gistered attorney or agent; or the  | tion identified above.   |
| Authorized Signature   | Daniel  | thech  |   | Date Se  | eptember 29, 200  | 5  |
| Typed or printed name Daniel S. Glueck   |   |  | Registration No. 37,838   |  |   |  |
| This collection of informatio<br>an application. Confidentiali<br>submitting the completed ap<br>this form and/or suggestions<br>Box 1450, Alexandria, Virgi<br>Alexandria, Virginia 22313-  | plication form to the USPTO<br>for reducing this burden, shinia 22313-1450. DO NOT S    | 11. The information 122 and 37 CFR O. Time will vary to the SEND FEES OR C   | on is required 1.14. This col depending up c Chief Inform COMPLETED   | to obtain or retain a benefit by<br>lection is estimated to take 12<br>pon the individual case. Any on<br>ation Officer, U.S. Patent and<br>D FORMS TO THIS ADDRES                           | the public which is to file (and<br>minutes to complete, includir<br>comments on the amount of tid<br>Trademark Office, U.S. Dep<br>SS. SEND TO: Commissioner   | I by the USPTO to processing gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450 |

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.